

Recipient Committee Campaign Statement — Short Form

Type or print in ink.

SHORT FORM

SEE INSTRUCTIONS ON REVERSE

For use by recipient committees which have not received a contribution or other receipt which must be itemized, have not received or made loans, and have no outstanding accrued expenses or enforceable promises received.

Check one of the following boxes to indicate the type of statement being filed:

- ☐ Pre-election Statement
 ☐ Quarterly Statement
 ☐ Supplemental Pre-election Statement (Attach a completed Form 495 to this statement.)
 ☐ Termination Statement (Attach a completed Form 415 to this statement.)
- ☒ Semi-annual Statement
 ☐ Special Odd-year Campaign Report

Statement covers period from <u>July 1, 1994</u> through <u>Dec. 31, 1994</u> Date of election if applicable: (Month, Day, Year)	Date Stamp RECEIVED 55 JAN 30 AM 8:40 JENNIFER M. PERREA CITY CLERK	CALIFORNIA TYPE FORM 450 Page ____ of ____ For Official Use Only
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I Committee Information

NAME OF COMMITTEE

Committee to Recall Davenport

ADDRESS OF COMMITTEE (NO. AND STREET)

1111 W. Tokay St. Suite A

CITY STATE ZIP CODE

Lodi Cal. 95242

AREA CODE/PHONE NUMBER

NONE

I.D. NUMBER

930573

NAME OF TREASURER

Thomas J. Newton

PERMANENT ADDRESS OF TREASURER (NO. AND STREET)

529 Plum Ct.

CITY STATE ZIP CODE

Lodi Cal. 95242

AREA CODE/DAYTIME PHONE NUMBER

209-369-6771

II Committee Type (check boxes) Is this a controlled committee? ☐ Yes ☒ No Is this a sponsored committee? ☐ Yes ☒ No Is this a broad based committee? ☐ Yes ☒ No

III Verification

This committee has not received any contributions, cumulative contributions or miscellaneous receipts from a single source totaling \$100 or more which must be itemized, and this committee has not made or received loans, and has no accrued expenses or outstanding enforceable promises received.

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on Jan 30, 1995 At Lodi Cal By Thomas J. Newton
DATE CITY AND STATE SIGNATURE OF TREASURER

An officeholder, candidate, or state measure proponent who controls a committee must also verify the campaign statement. I have used all reasonable diligence and to the best of my knowledge the treasurer has used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on _____ At _____ By _____
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, PROONENT, OR RESPONSIBLE OFFICER

Executed on _____ At _____ By _____
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, OR PROponent

Executed on _____ At _____ By _____
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, OR PROponent

*OR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT.

State of California Fair Political Practices Commission

Recipient Committee
Campaign Disclosure Statement
Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SHORT FORM

Statement covers period from <u>7-1-94</u> through <u>12-31-94</u>	CALIFORNIA 1994 FORM 450 Page <u>2</u> of <u>2</u> I.D. NUMBER <u>930573</u>
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NAME OF COMMITTEE

Committee To Recall Osborn

Expenditures Made

1. Expenditures of \$100 or more made this period \$ 0
2. Expenditures under \$100 (Not itemized.) 0
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD Add Lines 1 + 2 \$ 0
4. Total expenditures made from previous statement Previous Summary Page, Line 5 13,436
(If this is the first statement for the calendar year, enter zero.)
5. TOTAL EXPENDITURES MADE TO DATE Add Lines 3 + 4 \$ 13,436

Contributions Received

6. Monetary contributions received this period \$ 0
7. Non-monetary contributions received this period 0
8. Total contributions received from previous statement Previous Summary Page, Line 9 \$ 17,037
(If this is the first statement for the calendar year, enter zero.)
9. TOTAL CONTRIBUTIONS RECEIVED TO DATE Add Lines 6 + 7 + 8 \$ 17,037

Current Cash Statement

10. Beginning cash balance Previous Summary Page, Line 14 \$ 101
11. Cash receipts this period Line 6 above 0
12. Miscellaneous increases to cash 0
13. Cash expenditures this period Line 3 above 0
14. ENDING CASH BALANCE THIS PERIOD Add Lines 10 + 11 + 12, then subtract Line 13 \$ 101